

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Robert Throop :
: Art Unit: 2142
Serial No.: 10/060,541 :
: Examiner: Douglas B. Blair
Filed: January 30, 2002 :
:
For: SYSTEMS AND METHODS :
FOR MANAGING EMAIL :

Mail Stop: RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:
Transmittal and Amendment After Final in response to Office Action dated February
12, 2007 and made final (24 pages)

STATUS

2. Applicant
☐ claims small entity status.
☒ is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☒ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

| Extension for response within: | Other than small entity Fee | Small entity Fee (if applicable) |
|--|--------------------------------|-------------------------------------|
| <input type="checkbox"/> first month | \$ 120.00 | \$ 60.00 |
| <input checked="" type="checkbox"/> second month | \$ 450.00 | \$ 225.00 |
| <input type="checkbox"/> third month | \$ 1,020.00 | \$ 510.00 |
| <input type="checkbox"/> fourth month | \$ 1,590.00 | \$ 795.00 |
| <input type="checkbox"/> fifth month | \$ 2,160.00 | \$1,080.00 |
| | Fee Due | \$ 450.00 |

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension of _____ months has already been secured. The fee paid therefor \$_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ 450.00

OR

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

| | (Col. 1) | | (Col. 2) | (Col. 3) | SMALL ENTITY | OR | OTHER THAN SMALL ENTITY |
|--------------|---|-------|---------------------------------|---------------|-------------------------|----|-------------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | ADDITIONAL RATE FEE | | ADDITIONAL RATE FEE |
| TOTAL INDEP. | | MINUS | | = | x \$25.00 = \$ | | x \$50.00 = \$ |
| | | MINUS | | = | x \$100.00 = \$ | | x \$200.00 = \$ |
| — | FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | + \$180.00 = \$ | | + \$360.00 = \$ |
| | | | | | TOTAL ADDITIONAL FEE \$ | OR | TOTAL ADDITIONAL FEE \$ |

- (a) ☒ No additional fee for Claims is required

OR

- (b) ☐ Total additional fee for claims required \$

FEE PAYMENT

5. Attached is a check in the sum of \$

☒ Charge Deposit Account No. 01-2384 the sum of \$450.00.
A duplicate of this transmittal is attached.

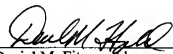
FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. ☐ Other:


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